## IN THE UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF ALABAMA

**EASTERN DIVISION** 

| DAVID DAVIS,                         |                                      |
|--------------------------------------|--------------------------------------|
| Plaintiff,                           | )<br>)                               |
| vs.                                  | )<br>)                               |
| PHENIX CITY, ALABAMA, <u>et al</u> . | )<br>) Judge Vanzetta Penn McPherson |
| Defendants.                          | )<br>)<br>)                          |

**ATTACHMENT H** 

04/21/2006

Barbara Goodwin/Personnel Director,

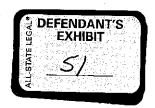
I am humbly requesting a copy of my personnel file, as well as any other files keep by the fire department or other city agencies. In addition, I am also requesting a copy of the paperwork associated with my final write-up and termination.

Respectively,

David P. Davis 185 Lee 236

Phenix City, AL 36870

(334) 291-1927



RSA-7 (2/04)

NOTICE /F. L DEPOSIT AND REQUEST ...

Retirement Systems of Alabama P. O. Box 302150 • Montgomery, Alabama 36130-2150 (334) 832-4140 or 1-800-214-2158 Web site: www.rsa.state.al.us

| Çheck One:<br>Ø ERS<br>□ TRS<br>□ JRF   |
|---|
| DEFENDANT'S EXHIBIT   |
| of Birth: 11-9-74   |
|   |
|   |
| SEFORE COMPLETING THE   |
|   |
| , less the 20% Federal Income Tax   |
| e trustee named below (for transfers<br>x withholding will be paid to me at the |
| lumber  |
|   |
| ate Zip   |
| 03(b) Tax Sheltered Annuity iovernmental Deferred Compensation lans (IRC 457)   |
| nts prior to signing this certification   |

|  | See reverse side fe   | or instructions.                              | EXHIBIT  |
|--|---|---|--|
| Please type or print using black is  | nk.   | t e e e                                       | 1 S 2  |
| PART I MEMBER INFORMATION  |   |   |  |
| Name: DAVIS DAVIO  | Paul<br>Middle  | Maiden  | Date of Birth: 11-9-74   |
| Social Security No.: 056. 19   | 1294  | lome Phone Number:                            | (  |
| Address: Street Address or P. O. B   | <u> </u>  | Vork Phone Number: (                          | )  |
| City State   | R   | SA Account Number: _<br>(If known)            |  |
| PART II DISTRIBUTION OPTION (PREMAINDER OF THIS FORM.)   | LEASE READ THE ENCLOS   | ED SPECIAL TAX NOT                            | TICE BEFORE COMPLETING THE   |
| Please check either Part A or Part B:  | 4-21-06   |   |  |
| Part A.   Lump Sum Payment: I elect to withholding required.   | Avid Davis  |   | count, less the 20% Federal Income Tax   |
| above address).  Trustee Information (complete only if:  Trustee Name:   | advised he<br>is leave no<br>in at this   | Jones to do                                   | to the trustee named below (for transfers ne Tax withholding will be paid to me at the count Number. |
| Contact Person:  | PA  | 1   | ne No.: ()   |
| Address: Street Address or   | 21  |   |  |
| Type of account into which money will t  |   |   | State Zip  |
| ☐ 401 Qualified Retirement Plan<br>☐ 408(a) Individual Retirement Account  | ☐ 403(a) Annuity Contracts<br>☐ 408(b) Individual Retirent<br>A Roth IRA or Education IRA | ent Annuity                                   | ☐ 403(b) Tax Sheltered Annuity<br>☐ Governmental Deferred Compensation<br>Plans (IRC 457)            |
| ertify that I have received the printed explana<br>id waive the requirement of 30 days notice by<br>llover. I also certify that I have read the Empl<br>gnature of Member: | loyment Termination Statem  | above and ammative<br>ent on the back of this | ly elect to make or not make a direct<br>s form.   |
|  |   |   |  |
| ATE OF, COUNTY OF,  fore me, the undersigned authority, a Notary Public oe the person whose name is subscribed to the forest   | in and for eaid County and State  | n and Marine III                              | appeared the applicant for refund, known to m foregoing instrument is true and correct.              |
| en under my hand and seal of office this the   |   |   |  |
|  |   |   |  |
| (Seal)   |   | ommission Expires:                            |  |



## PHENIX CITY Alabama

601-12th STREET PHENIX CITY, ALABAMA 36867 (334) 448-2751 - FAX (334) 448-2712

> JEFF HARDIN MAYOR

RAY BUSH COUNCIL MEMBER AT LARGE

H. H. (Bubba) ROBERTS

CITY MANAGER

JOHN STOREY COUNCIL MEMBER DISTRICT 1

GAIL BRANTLEY

ARTHUR SUMBRY COUNCIL MEMBER DISTRICT 2 COUNCIL MEMBER DISTRICT 3

> MARTHA HARRIS CITY CLERK

May 4, 2006

David P. Davis 185 Lee Road 236 Phenix City, AL 36870

RE: Personnel File

Dear Mr. Davis,

In response to your request for a copy of your personnel file you will find enclosed copies of all documents dated after August 5, 2005. You requested on that date a complete copy of your file and received the documents. The enclosed files are documents which have been added to your file since your obtaining the previous copy.

Should you have any questions please feel free to call.

Sincerely,

Barbara Goodwin Personnel Director

> DEFENDANT'S EXHIBIT